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PTO/SB/02A (3-97)

Approved for use through 9/30/98. OMB 0651-0032

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Richard		Joswick					
Inventor's Signature	<i>Richard Joswick Jr.</i>					Date	1/7/98
Residence: City	New Hartford	State	NY	Country	USA	Citizenship	USA
Post Office Address	301 Washington Drive						
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname					
Paul		Clifford					
Inventor's Signature	<i>Paul Clifford</i>					Date	1/7/98
Residence: City	Cold Brook	State	NY	Country	USA	Citizenship	USA
Post Office Address	PO Box 162, Route 8						
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname					
Roy A.		Gonzalez					
Inventor's Signature	<i>Roy A. Gonzalez</i>					Date	1/7/98
Residence: City	Westmoreland	State	NY	Country	USA	Citizenship	USA
Post Office Address	6256 Cooper Street						
Post Office Address							
City		State		ZIP		Country	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → **DECLARATION — Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Customer Number → Place Customer Number Bar Code Label here
OR
 Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
George R. McGuire	36,603	James R. Muldoon	38,249
Charles S. McGuire	20,385		

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below

Name	George R. McGuire		
Address	Hancock & Estabrook, LLP		
Address	1500 Mony Tower I-PO Box 4976		
City	Syracuse,	State	NY
Country	USA	Telephone	315-471-3151 x392
		Fax	315-471-3167

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned Inventor		
Given Name (first and middle [if any])		Family Name or Surname	
David S.	Allen		
Inventor's Signature	<i>David S Allen</i>		Date 1/1998
Residence: City	New Hartford	State	NY
Post Office Address	27 Hoffman Road		
Post Office Address			
City		State	
		ZIP	
			Country
<input type="checkbox"/> Additional Inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto			

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 4 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname				
Paul J.			Rusyniak				
Inventor's Signature	<i>Paul Rusyniak</i>				Date	1/7/98	
Residence: City	Rome	State	NY	Country	USA	Citizenship	USA
Post Office Address	6598 Seville Drive						
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])			Family Name or Surname				
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])			Family Name or Surname				
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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**VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(f) & 1.27(c))--SMALL BUSINESS CONCERN**

Docket Number (Optional)

091775-7

Applicant or Patentee: David S. Allen, et al.
 Serial or Patent No.: _____
 Filed or Issued: _____
 Title: Multiple Purpose Pocket Tool

I hereby declare that I am

- the owner of the small business concern identified below:
 an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF SMALL BUSINESS CONCERN Utica Cutlery Company

ADDRESS OF SMALL BUSINESS CONCERN 820 Noyes Street, P.O. Box 10527
Utica, New York 13503-1527

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.12, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees to the United States Patent and Trademark Office, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention described in:

- the specification filed herewith with title as listed above.
 the application identified above.
 the patent identified above.

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights in the invention must file separate verified statements averring to their status as small entities, and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization having any rights in the invention is listed below:

- no such person, concern, or organization exists.
 each such person, concern or organization is listed below.

Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING David S. Allen

TITLE OF PERSON IF OTHER THAN OWNER Vice President

ADDRESS OF PERSON SIGNING 27 Hoffman Rd., New Hartford, NY

SIGNATURE David S. Allen DATE 1/7/98